PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS. This from should be used for transmitting the ISSUE FEE and WIRILGATION FEE (if required). Blocks I through 5 should be completed when upportains. All intuhes correspondence including the Breach, advances orders and outfilestation of maintenance fees with the maintenance correspondence dedices as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance from infiliations.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 02/12/2010

MITCHELL P. BROOK

45263

LUCE, FORWARD, HAMILTON & SCRIPPS LLP 11988 EL CAMINO REAL, SUITE 200 SAN DIEGO, CA 92130

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Jason Berry	(Depositor's name)
Mars Ders	(Signature)
March 24, 2010	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/593,992	06/20/2007	Suk Shin In	32584-1050	3241

TITLE OF INVENTION: WATER HAMMER

(2) the name of a single firm (naving as a memoer a "	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
NEUDER, WILLIAM P 3672 175-296000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.86s). Change of correspondence address (cr Change of Correspondence Address from PrOSB/1/22) suddress from PrOSB/1/22) suddress from Ingiging from ProsB/1/22) sudgress from ProSB/1/22	nonprovisional	YES	\$755	\$300	\$0	\$1055	05/12/2010
1. Change of correspondence address or indication of "Foe Address" (37 CFR 1.363). 1. Change of correspondence address or indication of "Foe Address" (37 CR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, and the page of the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 Luce, Form	EXA	MINER	ART UNIT	CLASS-SUBCLASS			
CFR 1353). Change of correspondence address (or Change of Correspondence Address form PTOSDI122) attached. (1) the names of up to 3 registered patent attorneys a ragents OR, alternatively, (2) the among of a single firm (having as a member a 2 Luce, Form	NEUDER, WILLIAM P 3672			175-296000			
☐ "Fee Addrest" indication (or "Fee Address" Indication form PTO/SB47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. **Customer** **Custome	CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47. Rev 0.3-0.2 or more recent) attached. Use of a Customer		(1) the names of up to or agents OR, alternative (2) the name of a singlar registered attorney or a 2 registered patent atto	3 registered patent attorn wely, e firm (having as a memb agent) and the names of u- rneys or agents. If no name	era 2 Luce, For	ward, Hamilton	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

Mitchell P. Brook

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filled for

recordation as set forth in 37 CFR 3.11. Completion of this form is I	NOT a substitute for filing an assignment.	
(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)	
Please check the appropriate assignee category or categories (will not be	e printed on the patent):	
4a. The following fee(s) are submitted: 2 Issue Fee 2 Publication Fee (No small entity discount permitted) Advance Order - # of Copies	4b. Psyment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Physmeth y cordit card. Form PTO 2018 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Depoid Account Number 50 2-5228 (enclosion an extra copy of this form).	
 Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. 	□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	
NOTE: The Issue Fee and Publication Fee (if inquired) will not be acce- interest as shown by the records of the United States Patent and Tradem	pted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in ark Office.	
Authorized Signature	DateMarch 24, 2010	

Typed or printed name __ This collection of information is required by 37 CER 1311. The information is required to obtain or retain a benefit by the public which it to file (not by the USPTO) opcoess) an application. Conflictuality is governed by 35 U.S.C. 122 and 37 CPR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and the formation required to take 12 minutes to complete, including gathering, preparing, and the formation of the preparing to the control of the complete of the

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Registration No.

32,967